



AGENSI PEKERJAAN ASAHI (M) SDN. BHD.

NO 38A LORONG SENTOSA 4 TAMAN BAYU TINGGI 41200 KLANG

TEL: 03 3325 5959/ 5858 FAX: 033324 3843 License No. JTKSM 280C

PERSONAL DATA

Reference : SMU 289

Name : YASINTA KURNIASIH Date of Birth : 21 -05 -2001
 Age : 23 YO Place of Birth : MULYA ASRI
 Sex : FEMALE Height / Weight : 161 CM / 71 KG
 Religion : ISLAM Education : SENIOR HIGHT SCHOOL
 Address : PURWODADI RT.016 RW.005 KEL.PURWO DADI KEC.TRIMURJO KAB. LAMPUNG TENGAH

Marital Status Single Married Divorced Widowed
 Name of Father : SURANTO Age : 53 Y.O Occupation : FARMER
 Name of Mother : ESTU WIRITANINGSIH Age : 54 Y.O Occupation : -
 No.of Brother/Sister : 2 PERSON Your order in family : 2
 Name of Spouse : - Age : - Y.O Occupation : FARMER
 No. Of Children : - PERSON Sons :- PERSON Daughter : - PERSON

- | | | |
|--|---|--|
| 1. Are you afraid of dog and others pets ? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 2. Are you prepared to work for any nationality? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. Are you willing to handle,cut and cook pork? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. Do you feel dizzy when you are in a moving car? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 5. Do you smoke and consume alcohol? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 6. Have you ever had a major surgery ? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

INTERVIEW APRAISAL :

| | Poor | Fair | Good |
|-------------------------|--------------------------|-------------------------------------|-------------------------------------|
| Apperance & Personality | | | |
| Spoken English | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Household chores | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Cooking | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Care of Newborn Baby | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Care Children | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Care Elderly Person | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Care Disabled | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |



WORKING EXPERIENCE :

1. Experience in : LAMPUNG
 Name of Employer : MRS MAYA
 Period : 2021 - 2024
 Experience : TAKE CARE OF CHILD 1 Y.O AND 4 Y.O , FEEDING, SHOWER THEM, MAKE MILK, CLEAN THE HOUSE, WASH AND IRON THE CLOTH SHE IS NOT AFRAID OF DOG

2. Experience in :
 Name of Employer :
 Period :
 Experience :